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TO: Examiner Kim T. Nguyen

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FROM: Jeffrey M. Chamberlain

DIRECT DIAL: 609.631.2491

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MESSAGE: Serial No. 10/634,053

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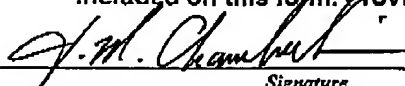
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002

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. Hasday-1
Applicant(s): Hasday			
Application No. 10/634,053	Filing Date 8/4/2003	Examiner Kim T. Nguyen	Group Art Unit 3713
Invention: FREE MARKET PLAYOFF SYSTEM AND METHODS THEREOF			
<p>I hereby certify that this <u>Amendment and transmittal; certificate of transmission</u> <i>(Identify type of correspondence)</i></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571.273.8300</u>)</p> <p>on <u>12/7/2005</u> <i>(Date)</i></p> <p style="text-align: right;"> <u>Susan Barlett</u> <i>(Typed or Printed Name of Person Signing Certificate)</i>  <i>(Signature)</i> </p> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>			

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003

AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. Hasday-1(Y1520-00001)	
Applicant(s): Hasday						
Application No. 10/634,053	Filing Date 8/4/2003	Examiner Kim T. Nguyen	Customer No. 28581	Group Art Unit 3713	Confirmation No. 5522	
Invention: FREE MARKET PLAYOFF SYSTEM AND METHODS THEREOF						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	29 -	49 =	0	x \$25.00	\$0.00	
INDEP. CLAIMS	2 -	3 =	0	x \$100.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2061 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature Jeffrey M. Chamberlain Reg. No. 55,044 Duane Morris LLP P.O. Box 5203 Princeton, NJ 08543-5203 609-631-2491			Dated: 12/7/2005 <div style="border: 1px solid black; padding: 5px;"> I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence </div>			
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DEC 07 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Michael J. Hasday

Serial No.: 10/634,053

Group Art Unit: 3713

Filed: August 4, 2003

Examiner: Kim T. Nguyen

For: FREE MARKET PLAYOFF SYSTEM
AND METHODS THEREOF

Confirmation No.: 5522

Atty. Docket No.: Hasday-1
(Y1520-00001)

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REPLY AND AMENDMENT

Sir:

This paper is responsive to the Office Action dated September 7, 2005. Kindly enter the following amendments:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.